



## EIPA REGISTRATION/RENEWAL FORM

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FOR OFFICE USE ONLY

### Deaf Persons' Interpreters Act 1982 PA 204 as amended 2007

Department of Energy, Labor & Economic Growth  
Michigan Commission on Disability Concerns  
Division on Deaf and Hard of Hearing

#### Charges will be added for Non-Sufficient Funds.

\$30.00 for Legislatively Mandated Annual Registration / Renewal Fee. (C3 Account Code 8070)

#### INSTRUCTIONS:

- Type or print legibly with black or blue ink only. Provide a response to all questions or write "N/A" (Not Applicable).
- Enclose the renewal fee (no cash) and make payable to "State of Michigan" US mail only to:  
Division on Deaf and Hard of Hearing  
Attn: EIPA Interpreter Registration/Renewal  
201 Washington Sq. Suite 150  
Lansing, MI 48913
- Fees are not refundable except for circumstances set forth in the Regulations Governing the Practice of Interpreting as applied to 1982 PA 204, as amended 2007.
- Include all supporting documents as indicated on the checklist. Failure to complete the registration/renewal form in full or omit required documents may cause processing delays.
- Sign and date your renewal form where indicated. Registrations/renewals without a signature will result in delayed registration.
- Keep a copy of your completed registration/renewal form.
- By completing this registration you agree to comply with all rules and regulations that governing the practice of Interpreting as applied to 1982 PA 204 amended 2007. Additional information regarding Rules and Regulations can be found on our website ([www.michigan.gov/mdcr](http://www.michigan.gov/mdcr)) upon completion of the rules promulgation process.
- Once the registration/renewal information has been received and processed, your credentials will be updated online and a new EIPA interpreter certification card will be sent to you.

**SECTION I: PERSONAL INFORMATION** You are responsible for updating your contact information on line after your initial registration. Failure to update contact changes and subsequent failure to receive information does not exempt you from any liability in relationship to the Michigan Deaf Persons' Interpreters Act (PA 204 of 1982, amended in 2007).

I am currently listed in the Online Interpreter Directory. ☐

I need a password and ID # to access my online interpreter registration . ☐

NAME (Last, First, Middle Initial):		EMAIL ADDRESS:	
ADDRESS (Street Number and Street Name):		CITY:	STATE: ZIP CODE:
HOME PHONE (With Area Code):		BUSINESS PHONE:	
CELL OR TEXT NUMBER:		VIDEOPHONE:	

#### SECTION II: RENEWAL OR FIRST-TIME REGISTRATION

Mark one of the two boxes below and complete additional information as needed for each category.

☐ First-time registration of 3.5 or higher  
EIPA level (Elementary/Secondary): \_\_\_\_\_  
EIPA mode (ASL/PSE/MCE)  
I have successfully passed the EIPA Written test.

☐ Renewal  
EIPA mode (ASL/PSE/MCE): \_\_\_\_\_  
I have successfully passed the EIPA Written test.

**SECTION III: RECORD OF ANNUAL PROFESSIONAL DEVELOPMENT ACTIVITIES (20 HOURS REQUIRED ANNUALLY AFTER INITIAL REGISTRATION)** Please attach additional paper if needed to complete listing of ALL activities.

CLASS/ EVENT TITLE?	PRESENTER/ ORGANIZER NAME(S)?	DATE AND TIMES (START/END)	GENERAL STUDIES OR PROFESSIONAL STUDIES?	NUMBER OF UNITS EARNED?	DOCUMENTS ATTACHED?

**SECTION IV: DEMOGRAPHIC INFORMATION:**

I am currently an educational interpreter at \_\_\_\_\_ (Name of School).

Operating under the school district of \_\_\_\_\_ (District)

☐ I am an employee of the school district.

☐ I am a contractor. The contract is under the following company:

Name of Company \_\_\_\_\_

Company contact \_\_\_\_\_

**CHECKLIST**

- \_\_\_ Completed registration/renewal form.
- \_\_\_ Payment made out to "State of Michigan"
- \_\_\_ Letter from Boys Town showing level, mode, and score.
- \_\_\_ Letter from Boys Town showing passed the EIPA written test if applicable.
- \_\_\_ Certificate showing activity approved for CEU/BEI units or pre-approved signed documentation

Print Name: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Mail registration/renewal form, payment, and supporting documentation to:

Division on Deaf and Hard of Hearing  
EIPA Interpreter Registration/Renewal  
201 N. Washington Square, Suite 150  
Lansing, MI 48913

(517) 335-6004/(877)499-6232

DELEG is an equal opportunity employer/program. Auxiliary aids, services and other reasonable accommodations are available upon request to individuals with disabilities.

8/11/2010

<b>Division on Deaf and Hard of Hearing</b>
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**POLICY FOR TEST APPLICATIONS, CREDENTIAL RENEWALS  
AND CREDENTIAL REGISTRATIONS FOR  
STATE OF MICHIGAN SIGN LANGUAGE INTERPRETERS**

The Division on Deaf and Hard of Hearing (DODHH) does not accept test applications, credential renewals or credential registration paperwork or any payments in the DODHH office. This is for the safety and security of our staff and to assure that payments are properly accounted for as well as an accounting policy.

All DODHH test applications, credential renewals or credential registrations must be mailed through the US Post Office for processing and will be delivered to the State of Michigan mailroom. \*Please use the mailing address listed on the respective forms, which is the DODHH mailing address. Once received at the mailroom the paperwork is then transferred to the State of Michigan Cashier's office for payment deposit and confirmation then sent to the DODHH office for final processing. PLEASE NOTE: This process can take up to 10 to 14 business days or more depending on state observed holidays.

\*Sending paperwork through priority mail options may not expedite the total process.

Thank you for your cooperation and assistance.

Division on Deaf and Hard of Hearing

June 10, 2011